

Receipt



862.C1977

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
TAKASHI YOSHIDA	)	Examiner: Not Yet Assigned
Application No.: 09/640,663	)	Group Art Unit: 2622
Filed: August 18, 2000	)	
For: MULTIFUNCTION APPARATUS	)	
AND METHOD OF	)	
IDENTIFYING DEVICE	)	
ATTACHED THERETO	)	November 16, 2000

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FEB 01 2001  
Technology Center 2600

Commissioner for Patents  
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Sir:

Applicant's attorneys have received an official Filing Receipt in the above-identified application in which the foreign application data is incorrect. The foreign application data should read as follows:

--JAPAN 11-237525 08/24/1999--.

Issuance of a corrected Filing Receipt, corrected as shown above, is accordingly respectfully requested.

Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant

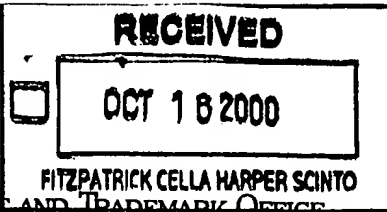
Registration No. 29,296  
29,296

FITZPATRICK, CELLA, HARPER & SCINTO  
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New York, New York 10112-3801  
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NY\_MAIN 126505v1



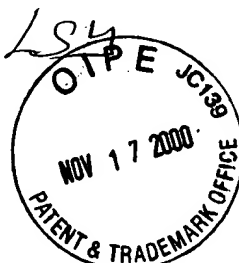
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WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/640,663	08/18/2000	2622	768	862.C1977	15	16	4

5514  
FITZPATRICK CELLA HARPER & SCINTO  
30 ROCKEFELLER PLAZA  
NEW YORK, NY 10112



## FILING RECEIPT



\*OC000000005460867\*

Date Mailed: 10/10/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

TAKASHI YOSHIDA, TOKYO, JAPAN;

## Continuing Data as Claimed by Applicant

## Foreign Applications

JAPAN 11-237525 08/24/2099

If Required, Foreign Filing License Granted 10/06/2000

## Title

MULTIFUNCTION APPARATUS AND METHOD OF IDENTIFYING DEVICE ATTACHED  
THERETO

## Preliminary Class

358

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Data entry by : SYDNOR, RUTH

Team : OIPE

Date: 10/10/2000



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/640,663	<b>FILING DATE</b> 08/18/2000 <b>RULE</b> -	<b>CLASS</b> 358	<b>GROUP ART UNIT</b> 2622	<b>ATTORNEY DOCKET NO.</b> 862.C1977
<b>APPLICANTS</b> TAKASHI YOSHIDA, TOKYO, JAPAN; <b>** CONTINUING DATA *****</b> <i>AR</i> <b>** FOREIGN APPLICATIONS *****</b> <i>AR</i> JAPAN 11-237525 08/24/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/06/2000</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Allowance Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 16
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b>  5514				
<b>TITLE</b> MULTIFUNCTION APPARATUS AND METHOD OF IDENTIFYING DEVICE ATTACHED THERETO				
<b>FILING FEE RECEIVED</b> 768	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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